

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

HCA INC. GOOD GOVERNMENT FUND

ADDRESS (number and street)

PO BOX 550

ONE PARK PLAZA

☐ Check if different than previously reported. (ACC)

NASHVILLE

TN

37203

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00067231

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15
Quarterly Report (Q1)☐ July 15
Quarterly Report (Q2)☐ October 15
Quarterly Report (Q3)☐ January 31
Year-End Report (YE)☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐ Termination Report
(TER)(b) Monthly
Report
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☒ Nov 20 (M11)
(Non-Election
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)
(Non-Election
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M / D D D / Y Y Y Y Y Y

in the
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y
10 01 2013

through

M M M / D D D / Y Y Y Y Y Y
10 31 2013

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer David Anderson

Signature of Treasurer

David Anderson

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y
11 18 2013

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3X**
Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

HCA INC. GOOD GOVERNMENT FUND

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
10 / 01 / 2013 To: M M / D D / Y Y Y Y Y Y
10 / 31 / 2013

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y Y 2013		281662.61
(b) Cash on Hand at Beginning of Reporting Period.....	173021.59	
(c) Total Receipts (from Line 19)	130423.43	165060.22
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	303445.02	446722.83
7. Total Disbursements (from Line 31)	8245.64	151523.45
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	295199.38	295199.38
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☒ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

HCA INC. GOOD GOVERNMENT FUND

Report Covering the Period:

From:

 M M / D D / Y Y Y Y
 10 01 2013

To:

 M M / D D / Y Y Y Y
 10 31 2013
I. Receipts
COLUMN A
Total This Period
COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

81820.45

101622.25

(ii) Unitemized

48599.99

58364.29

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ►

130420.44

159986.54

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5)

130420.44

159986.54

12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

5000.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

2.99

73.68

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3)

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),
12, 13, 14, 15, 16, 17, and 18(c))..... ►

130423.43

165060.22

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)

130423.43

165060.22

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	245.64	16923.45
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	245.64	16923.45
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	8000.00	135000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	0.00	-400.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	8245.64	151523.45
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	8245.64	151523.45

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	130420.44	159986.54
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	130420.44	159986.54
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	245.64	16923.45
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	245.64	16923.45

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 60
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HCA INC. GOOD GOVERNMENT FUND

Full Name (Last, First, Middle Initial)

A. Chris Accashian

Mailing Address 35 Catesby Lane

City State Zip Code
 Bedford NH 03110

FEC ID number of contributing
federal political committee.

C

Name of Employer

Parkland Med Ctr

Occupation

CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 30 2013

Transaction ID : SA11AI.28397

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Alice Adams

Mailing Address 13111 East Fuy

City State Zip Code
 Houston TX 77075

FEC ID number of contributing
federal political committee.

C

Name of Employer

East Houston

Occupation

CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 31 2013

Transaction ID : SA11AI.28703

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Jill Adams

Mailing Address 6834 NW 44th Street

City State Zip Code
 Jennings FL 32053

FEC ID number of contributing
federal political committee.

C

Name of Employer

Lake City Medical Center

Occupation

CFO/COO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 31 2013

Transaction ID : SA11AI.28675

Amount of Each Receipt this Period

350.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1850.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 60
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

HCA INC. GOOD GOVERNMENT FUND

Full Name (Last, First, Middle Initial)

A. Sandy Aderholt

Mailing Address 1601 Lake Randolph Dr

City State Zip Code
Powhatan VA 23139

FEC ID number of contributing
federal political committee.

C

Name of Employer

Henrico Doctors' Hospital

Occupation

Associate CNO - Retreat Campus

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2013

Transaction ID : SA11AI.28569

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Dale Alward

Mailing Address 1602 Skipwith Rd

City State Zip Code
Richmond VA 23229

FEC ID number of contributing
federal political committee.

C

Name of Employer

Henrico Doctors' Hospital

Occupation

Asst Administrator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2013

Transaction ID : SA11AI.28697

Amount of Each Receipt this Period

750.00

Full Name (Last, First, Middle Initial)

C. Jo Ann Ankoviak

Mailing Address 1431 SW 1st Ave

City State Zip Code
Ocala FL 34471

FEC ID number of contributing
federal political committee.

C

Name of Employer

Ocala Regional Medical Center

Occupation

CNO-ORMC

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2013

Transaction ID : SA11AI.28790

Amount of Each Receipt this Period

350.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1600.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

HCA INC. GOOD GOVERNMENT FUND

Full Name (Last, First, Middle Initial)

A. Shawn Armontrout

Mailing Address 11610 NW 56th Dr

City State Zip Code
 Coral Springs FL 33076

FEC ID number of contributing
federal political committee.

C

Name of Employer

Northwest Med Ctr

Occupation

ACNO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 30 / 2013

Transaction ID : SA11AI.28385

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Jeanna Barnard

Mailing Address 4000 Spencer Highway

City State Zip Code
 Pasadena TX 77504

FEC ID number of contributing
federal political committee.

C

Name of Employer

Bayshore Medical Ctr

Occupation

COO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 18 / 2013

Transaction ID : SA11AI.28293

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Brian Baumgardner

Mailing Address 2202 Coral Dr

City State Zip Code
 Lynn Haven FL 32444

FEC ID number of contributing
federal political committee.

C

Name of Employer

Gulf Coast Med Ctr

Occupation

CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 30 / 2013

Transaction ID : SA11AI.28496

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2250.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 9 OF 60
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

HCA INC. GOOD GOVERNMENT FUND

Full Name (Last, First, Middle Initial)

A. Paul Beaupre

Mailing Address 2425 Samaritan Dr

City State Zip Code
 San Jose CA 95124

FEC ID number of contributing
federal political committee.

C

Name of Employer

Good Samaritan Hosp

Occupation

CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 15 / 2013

Transaction ID : SA11AI.28191

Amount of Each Receipt this Period

750.00

Full Name (Last, First, Middle Initial)

B. Alisa Bert

Mailing Address 510 NW 84th Ave Apt 530

City State Zip Code
 Plantation FL 33324

FEC ID number of contributing
federal political committee.

C

Name of Employer

Aventura Hosp & Med Ctr

Occupation

CFO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 18 / 2013

Transaction ID : SA11AI.28273

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Karen Bibbo

Mailing Address 20900 Biscayne Blvd

City State Zip Code
 Aventura FL 33180

FEC ID number of contributing
federal political committee.

C

Name of Employer

Aventura Hospital

Occupation

CNO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 18 / 2013

Transaction ID : SA11AI.28272

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1750.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 10 OF 60
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

HCA INC. GOOD GOVERNMENT FUND

Full Name (Last, First, Middle Initial)

A. Robert Billings

Mailing Address 2890 Swan Circle

City State Zip Code
Dunedin FL 34698

FEC ID number of contributing
federal political committee.

C

Name of Employer
Largo Medical Center

Occupation
CFO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2013

Transaction ID : SA11AI.28645

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Kathy Bobbs

Mailing Address 109 E Peck Blvd

City State Zip Code
Lafayette LA 70508

FEC ID number of contributing
federal political committee.

C

Name of Employer
Regional Med Ctr of Acadiana

Occupation
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 15 / 2013

Transaction ID : SA11AI.28111

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Jill Bodden

Mailing Address 12349 Clydene Ct.

City State Zip Code
Jacksonville FL 32225

FEC ID number of contributing
federal political committee.

C

Name of Employer
Memorial Hospital

Occupation
Director Nursing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 30 / 2013

Transaction ID : SA11AI.28421

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1700.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 OF 60
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

HCA INC. GOOD GOVERNMENT FUND

Full Name (Last, First, Middle Initial)

A. Leona Boullion

Mailing Address 111 North Roelay

City State Zip Code
Lafayette LA 70506

FEC ID number of contributing
federal political committee.

C

Name of Employer
Women's & Children's Hospital

Occupation
CNO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 15 / 2013

Transaction ID : SA11AI.28112

Amount of Each Receipt this Period

125.00

Full Name (Last, First, Middle Initial)

B. Wendy Brandon

Mailing Address 5005 Maple Glen Place

City State Zip Code
Sanford FL 32771

FEC ID number of contributing
federal political committee.

C

Name of Employer
Central FL Regional Hospital

Occupation
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 18 / 2013

Transaction ID : SA11AI.28278

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Lisa Brodbeck

Mailing Address 1469 Brookside Drive

City State Zip Code
Carrollton TX 75007

FEC ID number of contributing
federal political committee.

C

Name of Employer
Medical Center of Lewisville

Occupation
CFO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2013

Transaction ID : SA11AI.28741

Amount of Each Receipt this Period

350.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1475.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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FOR LINE NUMBER:
(check only one)

PAGE 12 OF 60

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HCA INC. GOOD GOVERNMENT FUND

Full Name (Last, First, Middle Initial)

A. Lori Brown

Mailing Address 821 Sunrise Peak Ln

City

Las Vegas

State

NV

Zip Code

89144

FEC ID number of contributing
federal political committee.

C

Name of Employer

Sunrise Hospital

Occupation

Hosp Admin- CNO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 15 / 2013

Transaction ID : SA11AI.28189

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Terry Brown

Mailing Address 1796 Hwy 441 N

City

Okeechobee

State

FL

Zip Code

34972

FEC ID number of contributing
federal political committee.

C

Name of Employer

Raulerson Hospital

Occupation

CFO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 30 / 2013

Transaction ID : SA11AI.28458

Amount of Each Receipt this Period

350.00

Full Name (Last, First, Middle Initial)

C. Randy Butler

Mailing Address 8383 N. Davis Hwy

City

Pensacola

State

FL

Zip Code

32514

FEC ID number of contributing
federal political committee.

C

Name of Employer

West Florida Healthcare

Occupation

CFO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 30 / 2013

Transaction ID : SA11AI.28495

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1350.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

HCA INC. GOOD GOVERNMENT FUND

Full Name (Last, First, Middle Initial)

A. William S. Bynum

Mailing Address 501 Robertson Blvd

City

Walterboro

State

SC

Zip Code

29488

FEC ID number of contributing
federal political committee.

C

Name of Employer

Colleton Medical Center

Occupation

VP Bus. Development

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 30 / 2013

Transaction ID : SA11AI.28439

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. William Caldwell

Mailing Address 6010 Lakemont Drive

City

Roanoke

State

VA

Zip Code

24018

FEC ID number of contributing
federal political committee.

C

Name of Employer

LewisGale Med Ctr

Occupation

VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 15 / 2013

Transaction ID : SA11AI.28085

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Kathy Calvert

Mailing Address 8203 Boatwright Way

City

Jacksonville

State

FL

Zip Code

32216

FEC ID number of contributing
federal political committee.

C

Name of Employer

Memorial Hospital

Occupation

Director Education

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 30 / 2013

Transaction ID : SA11AI.28423

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

950.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HCA INC. GOOD GOVERNMENT FUND

Full Name (Last, First, Middle Initial)

A. Robert Campbell

Mailing Address 4201 S Alton St

City State Zip Code
 Greenwood Village CO 80111

FEC ID number of contributing
federal political committee.

C

Name of Employer

Continental Div

Occupation

Administration

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 18 / 2013

Transaction ID : SA11AI.28196

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. David Cantrell

Mailing Address 1202 Trentwood Ct.

City State Zip Code
 Lake Mark FL 32746

FEC ID number of contributing
federal political committee.

C

Name of Employer

South Bay Hospital

Occupation

CFO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 01 / 2013

Transaction ID : SA11AI.28004

Amount of Each Receipt this Period

350.00

Full Name (Last, First, Middle Initial)

C. Gary Cantrell

Mailing Address 11123 Lands End Chase

City State Zip Code
 Pt St Lucie FL 34986

FEC ID number of contributing
federal political committee.

C

Name of Employer

St Lucie Medical Center

Occupation

CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 31 / 2013

Transaction ID : SA11AI.28593

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1850.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 15 OF 60
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

HCA INC. GOOD GOVERNMENT FUND

Full Name (Last, First, Middle Initial)

A. Ginger Carroll

Mailing Address 4600 SW 46th Ct

City State Zip Code
 Ocala FL 34474

FEC ID number of contributing
federal political committee.

C

Name of Employer

Ocala Reg Med Ctr

Occupation

CEO - WMCH

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 31 / 2013

Transaction ID : SA11AI.28782

Amount of Each Receipt this Period

750.00

Full Name (Last, First, Middle Initial)

B. Lee Chaykin

Mailing Address 8201 West Broward Blvd

City State Zip Code
 Plantation FL 33324

FEC ID number of contributing
federal political committee.

C

Name of Employer

Westside Regional

Occupation

CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 30 / 2013

Transaction ID : SA11AI.28540

Amount of Each Receipt this Period

1500.00

Full Name (Last, First, Middle Initial)

C. Scott Cihak

Mailing Address 11043 NW 3rd Street

City State Zip Code
 Coral Springs FL 33071

FEC ID number of contributing
federal political committee.

C

Name of Employer

Kendall Regional Med Ctr

Occupation

CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 10 / 2013

Transaction ID : SA11AI.28046

Amount of Each Receipt this Period

750.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

3000.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

HCA INC. GOOD GOVERNMENT FUND

Full Name (Last, First, Middle Initial)

A. Jason Cobb

Mailing Address 211 4th Street

City

Alexandria

State

LA

Zip Code

71301

FEC ID number of contributing
federal political committee.

C

Name of Employer

Rapides Reg Med Ctr

Occupation

CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 10 / 2013

Transaction ID : SA11AI.28066

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Robert Conroy

Mailing Address 6500 38th Ave N

City

St. Petersburg

State

FL

Zip Code

33710

FEC ID number of contributing
federal political committee.

C

Name of Employer

St. Petersburg General

Occupation

CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 01 / 2013

Transaction ID : SA11AI.27980

Amount of Each Receipt this Period

750.00

Full Name (Last, First, Middle Initial)

C. Brian Cook

Mailing Address 2626 Capital Medical Blvd

City

Tallahassee

State

FL

Zip Code

32308

FEC ID number of contributing
federal political committee.

C

Name of Employer

Capital Regional Med Ctr

Occupation

CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2013

Transaction ID : SA11AI.28712

Amount of Each Receipt this Period

750.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2500.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

HCA INC. GOOD GOVERNMENT FUND

Full Name (Last, First, Middle Initial)

A. Kevin Corcoran

Mailing Address 8201 West Broward Blvd

City State Zip Code
 Plantation FL 33324

FEC ID number of contributing
federal political committee.

C

Name of Employer

Westside Regional

Occupation

CFO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 30 2013

Transaction ID : SA11AI.28554

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

B. David Coughlin

Mailing Address 1126 W 28th Pl

City State Zip Code
 Panama City FL 32405

FEC ID number of contributing
federal political committee.

C

Name of Employer

Gulf Coast Medical

Occupation

Director Risk Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 30 2013

Transaction ID : SA11AI.28373

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Anthony Degina

Mailing Address 1020 Mango Isle

City State Zip Code
 Ft Lauderdale FL 33315

FEC ID number of contributing
federal political committee.

C

Name of Employer

Plantation General Hospital

Occupation

CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 31 2013

Transaction ID : SA11AI.28627

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1550.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

HCA INC. GOOD GOVERNMENT FUND

Full Name (Last, First, Middle Initial)

A. Laura DeMotte

Mailing Address 1314 Live Oak Ln

City State Zip Code
 Jacksonville FL 32207

FEC ID number of contributing
federal political committee.

C

Name of Employer

Memorial Hospital

Occupation

VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 30 / 2013

Transaction ID : SA11AI.28425

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

B. Ruth DePalantino

Mailing Address 924 Myakka Ct Ne

City State Zip Code
 St. Petersburg FL 33702

FEC ID number of contributing
federal political committee.

C

Name of Employer

Blake Medical Center

Occupation

CNO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 30 / 2013

Transaction ID : SA11AI.28408

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Kenneth Donahey

Mailing Address 1028 Crimson Way

City State Zip Code
 Hendersonville TN 37075

FEC ID number of contributing
federal political committee.

C

Name of Employer

Hendersonville Med Ctr

Occupation

COO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 30 / 2013

Transaction ID : SA11AI.28498

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1200.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

HCA INC. GOOD GOVERNMENT FUND

Full Name (Last, First, Middle Initial)

A. Justin Doss

Mailing Address 12536 Natureview Circle

City State Zip Code
Bradenton FL 34212

FEC ID number of contributing
federal political committee.

C

Name of Employer

Blake Med Ctr

Occupation

COO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

409.05

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 15 / 2013

Transaction ID : SA11AI.28095

Amount of Each Receipt this Period

45.45

Full Name (Last, First, Middle Initial)

B. Elizabeth Durrence

Mailing Address 11750 SW 40 St

City State Zip Code
Miami FL 33175

FEC ID number of contributing
federal political committee.

C

Name of Employer

Kendal Regional Med Ctr

Occupation

COO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 10 / 2013

Transaction ID : SA11AI.28028

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Steve Edgar

Mailing Address 550 N Hillside

City State Zip Code
Wichita KS 67214

FEC ID number of contributing
federal political committee.

C

Name of Employer

Wesley Medical Ctr

Occupation

COO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 30 / 2013

Transaction ID : SA11AI.28475

Amount of Each Receipt this Period

750.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1045.45

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

HCA INC. GOOD GOVERNMENT FUND

Full Name (Last, First, Middle Initial)

A. Ohme Entin

Mailing Address 4000 Spencer Hwy

City State Zip Code
Pasadena TX 77504

FEC ID number of contributing
federal political committee.

C

Name of Employer

Bayshore Medical Center

Occupation

COO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 18 / 2013

Transaction ID : SA11AI.28296

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Robert Foreman

Mailing Address 4201 Tampico Trail

City State Zip Code
Spring Hill FL 34607

FEC ID number of contributing
federal political committee.

C

Name of Employer

Oak Hill Hospital

Occupation

VP Physician Relations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 18 / 2013

Transaction ID : SA11AI.28228

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

C. Brennan Francois

Mailing Address 9754 Wilson Drive

City State Zip Code
Chattanooga TN 37363

FEC ID number of contributing
federal political committee.

C

Name of Employer

Parkridge Valley

Occupation

CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 30 / 2013

Transaction ID : SA11AI.28536

Amount of Each Receipt this Period

750.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1550.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

HCA INC. GOOD GOVERNMENT FUND

Full Name (Last, First, Middle Initial)

A. Dan Friedrich

Mailing Address 7208 19th Ave NW

City State Zip Code
Bradenton FL 34209

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blake Medical Center

Occupation
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 30 / 2013

Transaction ID : SA11AI.28409

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Arturo Garza

Mailing Address 1001 E Fern Ave, Apt C308

City State Zip Code
McAllen TX 78501

FEC ID number of contributing
federal political committee.

C

Name of Employer
Rio Grande Regional Hosp.

Occupation
Associate Administrator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2013

Transaction ID : SA11AI.28704

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Christopher George

Mailing Address 14000 Fivay Rd

City State Zip Code
Hudson FL 34667

FEC ID number of contributing
federal political committee.

C

Name of Employer
Regionl Med Ctr Bayonet Point

Occupation
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 01 / 2013

Transaction ID : SA11AI.28013

Amount of Each Receipt this Period

750.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2250.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

HCA INC. GOOD GOVERNMENT FUND

Full Name (Last, First, Middle Initial)

A. John Gerhold

Mailing Address 216 Bristol Place

City State Zip Code
 Slidell LA 70461

FEC ID number of contributing
federal political committee.

C

Name of Employer

Lakeview Regional

Occupation

Director of Radiology/Rehab

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 30 / 2013

Transaction ID : SA11AI.28542

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Dianne Goldenberg

Mailing Address 610 N Lakeside Dr

City State Zip Code
 Lake Worth FL 33460

FEC ID number of contributing
federal political committee.

C

Name of Employer

Northwest Med Ctr

Occupation

CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1750.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 18 / 2013

Transaction ID : SA11AI.28274

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Sonia Gonzalez

Mailing Address 13624 Cooper Rd

City State Zip Code
 Spring Hill FL 34609

FEC ID number of contributing
federal political committee.

C

Name of Employer

Oak Hill Hospital

Occupation

COO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 18 / 2013

Transaction ID : SA11AI.28229

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2000.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

HCA INC. GOOD GOVERNMENT FUND

Full Name (Last, First, Middle Initial)

A. Robert Grace

Mailing Address 893 Bluff View Dr

City State Zip Code
 Myrtle Beach SC 29579

FEC ID number of contributing
federal political committee.

C

Name of Employer

Grand Strand Reg Med Ctr

Occupation

CFO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 15 / 2013

Transaction ID : SA11AI.28105

Amount of Each Receipt this Period

350.00

Full Name (Last, First, Middle Initial)

B. Jeremy Gray

Mailing Address 1000 Mar Walt Dr

City State Zip Code
 FWB FL 32547

FEC ID number of contributing
federal political committee.

C

Name of Employer

FWB Med Ctr

Occupation

COO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 15 / 2013

Transaction ID : SA11AI.28154

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Bradley Griffin

Mailing Address 501 Robertson Blvd

City State Zip Code
 Waltersboro SC 29488

FEC ID number of contributing
federal political committee.

C

Name of Employer

Colleton Med Ctr

Occupation

CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 30 / 2013

Transaction ID : SA11AI.28438

Amount of Each Receipt this Period

350.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

950.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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(check only one)

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NAME OF COMMITTEE (In Full)

HCA INC. GOOD GOVERNMENT FUND

Full Name (Last, First, Middle Initial)

A. Sandra Grimes

Mailing Address 3625 University Blvd S

City State Zip Code
 Jacksonville FL 32216

FEC ID number of contributing
federal political committee.

C

Name of Employer

Memorial Hospital

Occupation

CNO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

850.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 31 2013

Transaction ID : SA11AI.28818

Amount of Each Receipt this Period

350.00

Full Name (Last, First, Middle Initial)

B. Erica Gulrich

Mailing Address 8809 NW 55th PI

City State Zip Code
 Coral Springs FL 33067

FEC ID number of contributing
federal political committee.

C

Name of Employer

Northwest Med Ctr

Occupation

COO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 30 2013

Transaction ID : SA11AI.28384

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Mary Halverson

Mailing Address 9137 Hunters Bend Circle

City State Zip Code
 Ooltewah TN 37363

FEC ID number of contributing
federal political committee.

C

Name of Employer

Parkridge Valley Hospital

Occupation

CFO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 30 2013

Transaction ID : SA11AI.28535

Amount of Each Receipt this Period

350.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1200.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

HCA INC. GOOD GOVERNMENT FUND

Full Name (Last, First, Middle Initial)

A. Scott Hankinson

Mailing Address 1431 SW 1st Ave

City State Zip Code
Ocala FL 34471

FEC ID number of contributing
federal political committee.

C

Name of Employer

Ocala Regional

Occupation

CFO-OHS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2013

Transaction ID : SA11AI.28789

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Brandon Haushalter

Mailing Address 5 Paris Ridge Lane

City State Zip Code
Henrico VA 23229

FEC ID number of contributing
federal political committee.

C

Name of Employer

Chippenham

Occupation

COO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2013

Transaction ID : SA11AI.28566

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Connie Hawthorn

Mailing Address 9323 Jaybird Circle East

City State Zip Code
Jacksonville FL 32257

FEC ID number of contributing
federal political committee.

C

Name of Employer

Memorial Hospital

Occupation

Dir. Outpatient Svcs.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 30 / 2013

Transaction ID : SA11AI.28427

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1200.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

HCA INC. GOOD GOVERNMENT FUND

Full Name (Last, First, Middle Initial)

A. Laurie Haynes

Mailing Address 2809 Hawks Landing Blvd

City State Zip Code
 Panama City FL 32405

FEC ID number of contributing
federal political committee.

C

Name of Employer

Gulf Coast Med Ctr

Occupation

CFO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 30 / 2013

Transaction ID : SA11AI.28368

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Michael Herron

Mailing Address 9716 Crestline Heights Ct.

City State Zip Code
 Las Vegas NV 89178

FEC ID number of contributing
federal political committee.

C

Name of Employer

Mountainview Hospital

Occupation

CFO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 31 / 2013

Transaction ID : SA11AI.28658

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Nancy Hilton

Mailing Address 3213 SE Braemar Way

City State Zip Code
 Pt St Lucie FL 34952

FEC ID number of contributing
federal political committee.

C

Name of Employer

St Lucie Medical Center

Occupation

CNO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 31 / 2013

Transaction ID : SA11AI.28596

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1500.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

HCA INC. GOOD GOVERNMENT FUND

Full Name (Last, First, Middle Initial)

A. James III Hiott

Mailing Address 310 Silverhill Rd

City State Zip Code
Walterboro SC 29488

FEC ID number of contributing
federal political committee.

C

Name of Employer
Colleton Medical Center

Occupation
CFO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 30 / 2013

Transaction ID : SA11AI.28440

Amount of Each Receipt this Period

350.00

Full Name (Last, First, Middle Initial)

B. Ann Holt

Mailing Address 7141 Crooked Tree Dr.

City State Zip Code
Anchorage AK 99507

FEC ID number of contributing
federal political committee.

C

Name of Employer
Alaska Regional Hospital

Occupation
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 18 / 2013

Transaction ID : SA11AI.28215

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

C. Holly Jackson

Mailing Address 4455 NW 36th Dr

City State Zip Code
Gainesville FL 32605

FEC ID number of contributing
federal political committee.

C

Name of Employer
Community Hospital

Occupation
Assoc. Administrator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 30 / 2013

Transaction ID : SA11AI.28370

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1150.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

HCA INC. GOOD GOVERNMENT FUND

Full Name (Last, First, Middle Initial)

A. Suzanne Jackson

Mailing Address 9415 Rim Rock Ct

City

Manassas

State

VA

Zip Code

20112

FEC ID number of contributing
federal political committee.

C

Name of Employer

Dominion Hospital

Occupation

CEO

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2013

Transaction ID : SA11AI.28611

Amount of Each Receipt this Period

750.00

Full Name (Last, First, Middle Initial)

B. Tom Jackson

Mailing Address PO Box 21453

City

Chattanooga

State

TN

Zip Code

37424

FEC ID number of contributing
federal political committee.

C

Name of Employer

Parkridge Med Ctr

Occupation

Market CFO

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 30 / 2013

Transaction ID : SA11AI.28364

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Theresa Jefferson

Mailing Address 1011 Tranquiview Lane

City

Valrico

State

FL

Zip Code

33594

FEC ID number of contributing
federal political committee.

C

Name of Employer

South Bay Hospital

Occupation

CNO

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 01 / 2013

Transaction ID : SA11AI.28001

Amount of Each Receipt this Period

350.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1600.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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for each category of the
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NAME OF COMMITTEE (In Full)

HCA INC. GOOD GOVERNMENT FUND

Full Name (Last, First, Middle Initial)

A. Kevin Johnson

Mailing Address 1000 E 100 N

City State Zip Code
Payson UT 84651

FEC ID number of contributing
federal political committee.

C

Name of Employer

Mountain View Hospital

Occupation

CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 30 / 2013

Transaction ID : SA11AI.28499

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Anna Jonason

Mailing Address PO Box 428

City State Zip Code
Goose Creek SC 29445

FEC ID number of contributing
federal political committee.

C

Name of Employer

Colleton Medical Center

Occupation

CNO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 30 / 2013

Transaction ID : SA11AI.28441

Amount of Each Receipt this Period

350.00

Full Name (Last, First, Middle Initial)

C. Kelly Kern

Mailing Address 6159 O'Bannon

City State Zip Code
Las Vegas NV 89146

FEC ID number of contributing
federal political committee.

C

Name of Employer

Mountain View Hospital

Occupation

VP Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2013

Transaction ID : SA11AI.28659

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1100.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

HCA INC. GOOD GOVERNMENT FUND

Full Name (Last, First, Middle Initial)

A. Rand Kerr

Mailing Address 630 E Medical Drive

City State Zip Code
 Bountiful UT 84010

FEC ID number of contributing
federal political committee.

C

Name of Employer

Lakeview Hospital

Occupation

CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 30 2013

Transaction ID : SA11AI.28524

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Jane Killian

Mailing Address 333 SE Mojave Way

City State Zip Code
 Lake City FL 32025

FEC ID number of contributing
federal political committee.

C

Name of Employer

Lake City Med Ctr

Occupation

Director of Pharmacy

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 31 2013

Transaction ID : SA11AI.28688

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Steve Killian

Mailing Address 992 Mackenzie Creek Ave

City State Zip Code
 Henderson NV 89002

FEC ID number of contributing
federal political committee.

C

Name of Employer

Sunrise Hospital

Occupation

CFO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 18 2013

Transaction ID : SA11AI.28319

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1250.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

HCA INC. GOOD GOVERNMENT FUND

Full Name (Last, First, Middle Initial)

A. Carol Landry

Mailing Address 1796 Big Branch

City State Zip Code
 Middleburg FL 32068

FEC ID number of contributing
federal political committee.

C

Name of Employer

Memorial Hospital

Occupation

VP Quality

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 15 / 2013

Transaction ID : SA11AI.28088

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

B. Thomas Lawhorne

Mailing Address 14000 Fivay Rd

City State Zip Code
 Hudson FL 34667

FEC ID number of contributing
federal political committee.

C

Name of Employer

Reg Med Ctr Bayonet Point

Occupation

CFO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 01 / 2013

Transaction ID : SA11AI.28016

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Claudia Leal

Mailing Address 4000 Spencer Hwy

City State Zip Code
 Pasadena TX 77504

FEC ID number of contributing
federal political committee.

C

Name of Employer

Bayshore Medical Center

Occupation

CFO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 18 / 2013

Transaction ID : SA11AI.28295

Amount of Each Receipt this Period

400.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1100.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

HCA INC. GOOD GOVERNMENT FUND

Full Name (Last, First, Middle Initial)

A. Matthew Leary

Mailing Address 550 N Hillside

City State Zip Code
Wichita KS 67214

FEC ID number of contributing
federal political committee.

C

Name of Employer

Wesley Medical Center

Occupation

CFO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 30 2013

Transaction ID : SA11AI.28465

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Robert Lee

Mailing Address 1796 Hwy 441 N

City State Zip Code
Okeechobee FL 34972

FEC ID number of contributing
federal political committee.

C

Name of Employer

Raulerson Hospital

Occupation

CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 30 2013

Transaction ID : SA11AI.28456

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Anne Leonard

Mailing Address 1293 Elrod Rd

City State Zip Code
Bowling Green KY 42104

FEC ID number of contributing
federal political committee.

C

Name of Employer

Greenview Regional

Occupation

CNO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 10 2013

Transaction ID : SA11AI.28069

Amount of Each Receipt this Period

350.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1350.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

HCA INC. GOOD GOVERNMENT FUND

Full Name (Last, First, Middle Initial)

A. Wendy Lincoln

Mailing Address 9067 Baywood Park Dr

City
Seminole

State Zip Code
FL 33777

FEC ID number of contributing
federal political committee.

C

Name of Employer

Northside

Occupation

CNO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2013

Transaction ID : SA11AI.28770

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Gary Malaer

Mailing Address 4539 River Close Blvd

City
Valrico

State Zip Code
FL 33596

FEC ID number of contributing
federal political committee.

C

Name of Employer

South Bay Hospital

Occupation

COO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 01 / 2013

Transaction ID : SA11AI.28000

Amount of Each Receipt this Period

350.00

Full Name (Last, First, Middle Initial)

C. John Marshall

Mailing Address 111 Hwy 70 E

City
Dickson

State Zip Code
TN 37055

FEC ID number of contributing
federal political committee.

C

Name of Employer

Horizon Medical Center

Occupation

CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2013

Transaction ID : SA11AI.28796

Amount of Each Receipt this Period

750.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1600.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

HCA INC. GOOD GOVERNMENT FUND

Full Name (Last, First, Middle Initial)

A. Rita Martinez

Mailing Address 500 Medical Center Blvd

City

State

Zip Code

Webster

TX

77598

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Clear Lake Regional

SLD Critical Care

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

10 / 31 / 2013

Transaction ID : SA11AI.28702

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Ashley Wilson McClellan

Mailing Address 5441 Emerson Avenue

City

State

Zip Code

Dallas

TX

75209

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Medical Center of Lewisville

COO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

10 / 31 / 2013

Transaction ID : SA11AI.28761

Amount of Each Receipt this Period

650.00

Full Name (Last, First, Middle Initial)

C. Bobby McCullough

Mailing Address 255 St Johns Forest Blvd

City

State

Zip Code

St Johns

FL

32259

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Memorial Hospital

Chief Operating Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

10 / 30 / 2013

Transaction ID : SA11AI.28416

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1650.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)

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NAME OF COMMITTEE (In Full)

HCA INC. GOOD GOVERNMENT FUND

Full Name (Last, First, Middle Initial)

A. Benny McDonald

Mailing Address 131 River Lane SW

City State Zip Code
Rome GA 30165

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cartersville Med Ctr

Occupation

CFO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 30 / 2013

Transaction ID : SA11AI.28529

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Holly McGucken

Mailing Address 1000 Mar Walt Dr

City State Zip Code
FWB FL 32547

FEC ID number of contributing
federal political committee.

C

Name of Employer

Ft. Walton Beach Med Ctr

Occupation

CNO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 15 / 2013

Transaction ID : SA11AI.28169

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Tim McManus

Mailing Address 16237 Maple Hall Dr

City State Zip Code
Midlothian VA 23113

FEC ID number of contributing
federal political committee.

C

Name of Employer

CJW Medical Ctr

Occupation

CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2013

Transaction ID : SA11AI.28565

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2000.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

HCA INC. GOOD GOVERNMENT FUND

Full Name (Last, First, Middle Initial)

A. Randall McVay

Mailing Address 1431 SW 1st Ave

City State Zip Code
Ocala FL 34471

FEC ID number of contributing
federal political committee.

C

Name of Employer

Ocala Reg Med Ctr

Occupation

CEO-OHS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2013

Transaction ID : SA11AI.28783

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Brian Melear

Mailing Address 1674 SW 22nd Terrace

City State Zip Code
Okeechobee FL 34974

FEC ID number of contributing
federal political committee.

C

Name of Employer

Raulerson Hospital

Occupation

CNO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 30 / 2013

Transaction ID : SA11AI.28457

Amount of Each Receipt this Period

350.00

Full Name (Last, First, Middle Initial)

C. Gary Mervak

Mailing Address 1106 NE 4 Street

City State Zip Code
Ft. Lauderdale FL 33301

FEC ID number of contributing
federal political committee.

C

Name of Employer

Mercy Hospital

Occupation

CFO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 18 / 2013

Transaction ID : SA11AI.28260

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1850.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

HCA INC. GOOD GOVERNMENT FUND

Full Name (Last, First, Middle Initial)

A. James (RMCA) Miller

Mailing Address 2810 Ambassador Caffery Pkwy

City State Zip Code
 Lafayette LA 70526

FEC ID number of contributing
federal political committee.

C

Name of Employer

Regional Med Ctr Acadiana

Occupation

CFO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 01 / 2013

Transaction ID : SA11AI.27974

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. Jarrett Millsaps

Mailing Address 7477 Commons Blvd

City State Zip Code
 Chattanooga TN 37421

FEC ID number of contributing
federal political committee.

C

Name of Employer

Parkridge East

Occupation

healthcare

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 30 / 2013

Transaction ID : SA11AI.28518

Amount of Each Receipt this Period

350.00

Full Name (Last, First, Middle Initial)

C. Trula Minton

Mailing Address 401 Winterslow Rd

City State Zip Code
 Richmond VA 23235

FEC ID number of contributing
federal political committee.

C

Name of Employer

CJW Medical Center

Occupation

CNO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 31 / 2013

Transaction ID : SA11AI.28568

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

900.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

HCA INC. GOOD GOVERNMENT FUND

Full Name (Last, First, Middle Initial)

A. Mitchell Mongell

Mailing Address 1000 Mar Walt Dr

City State Zip Code
FWB FL 32547

FEC ID number of contributing
federal political committee.

C

Name of Employer

FWB Med Ctr

Occupation

CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 15 / 2013

Transaction ID : SA11AI.28171

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Jeffrey Moore

Mailing Address 1000 Mar Walt Dr

City State Zip Code
FWB FL 32547

FEC ID number of contributing
federal political committee.

C

Name of Employer

FWB Med Ctr

Occupation

CFO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 15 / 2013

Transaction ID : SA11AI.28172

Amount of Each Receipt this Period

750.00

Full Name (Last, First, Middle Initial)

C. Randolph 'Randy' Moresi

Mailing Address 4809 Woodcreek Ct

City State Zip Code
NRH TX 76180

FEC ID number of contributing
federal political committee.

C

Name of Employer

North Hills Hospital

Occupation

CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2013

Transaction ID : SA11AI.28805

Amount of Each Receipt this Period

750.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2500.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

HCA INC. GOOD GOVERNMENT FUND

Full Name (Last, First, Middle Initial)

A. Chris Mosley

Mailing Address 139 White Pine Way

City State Zip Code
 Summerville SC 29485

FEC ID number of contributing
federal political committee.

C

Name of Employer

Trident Health System

Occupation

VP Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 31 2013

Transaction ID : SA11AI.28585

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Christopher Mowan

Mailing Address 716 Wellesley

City State Zip Code
 El Paso TX 79902

FEC ID number of contributing
federal political committee.

C

Name of Employer

Sunrise Hospital

Occupation

COO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 31 2013

Transaction ID : SA11AI.28667

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Eric Naegler

Mailing Address 543 NW Brook Loop

City State Zip Code
 Lake City FL 32055

FEC ID number of contributing
federal political committee.

C

Name of Employer

Laek City med Ctr

Occupation

CNO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 31 2013

Transaction ID : SA11AI.28673

Amount of Each Receipt this Period

350.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1850.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

HCA INC. GOOD GOVERNMENT FUND

Full Name (Last, First, Middle Initial)

A. Kelli Nations

Mailing Address 4401 Champions Court

City State Zip Code
 League City TX 77573

FEC ID number of contributing
federal political committee.

C

Name of Employer
Mainland Medical Center

Occupation
Associate CNO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 18 / 2013

Transaction ID : SA11AI.28294

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Chris Nicosia

Mailing Address 204 Walden Dr

City State Zip Code
 Portland TX 78374

FEC ID number of contributing
federal political committee.

C

Name of Employer
Corpus Christi Med Ctr

Occupation
CFO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 31 / 2013

Transaction ID : SA11AI.28560

Amount of Each Receipt this Period

750.00

Full Name (Last, First, Middle Initial)

C. Tim O'Brien

Mailing Address 8201 West Broward Blvd

City State Zip Code
 Plantation FL 33324

FEC ID number of contributing
federal political committee.

C

Name of Employer
Westside Regional

Occupation
Admin Assoc

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 30 / 2013

Transaction ID : SA11AI.28538

Amount of Each Receipt this Period

350.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1600.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

HCA INC. GOOD GOVERNMENT FUND

Full Name (Last, First, Middle Initial)

A. James O'Loughlin

Mailing Address 13802 Bella Riva Lane

City

Jacksonville

State

FL

Zip Code

32225

FEC ID number of contributing
federal political committee.

C

Name of Employer

Memorial Hospital

Occupation

CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 30 / 2013

Transaction ID : SA11AI.28415

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Art Osberg

Mailing Address 1431 SW 1st Ave

City

Ocala

State

FL

Zip Code

34471

FEC ID number of contributing
federal political committee.

C

Name of Employer

Ocala Reg Med Ctr

Occupation

CMO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2013

Transaction ID : SA11AI.28788

Amount of Each Receipt this Period

350.00

Full Name (Last, First, Middle Initial)

C. Anthony Ottaviani

Mailing Address 464 Bluff View Dr

City

Belleair Bluffs

State

FL

Zip Code

33770

FEC ID number of contributing
federal political committee.

C

Name of Employer

Largo Med Ctr

Occupation

CMA, GME

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2013

Transaction ID : SA11AI.28625

Amount of Each Receipt this Period

350.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1700.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

HCA INC. GOOD GOVERNMENT FUND

Full Name (Last, First, Middle Initial)

A. James Patrick

Mailing Address 5355 Wondering Way

City State Zip Code
Mason OH 45040

FEC ID number of contributing
federal political committee.

C

Name of Employer

Orange Park Med Ctr

Occupation

CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2013

Transaction ID : SA11AI.28586

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Richard Patterson

Mailing Address 910 Montclair Drive

City State Zip Code
Bowling Green KY 42103

FEC ID number of contributing
federal political committee.

C

Name of Employer

Greenview Regional

Occupation

CFO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 10 / 2013

Transaction ID : SA11AI.28068

Amount of Each Receipt this Period

350.00

Full Name (Last, First, Middle Initial)

C. Larry Peal

Mailing Address 299 Kings Daughters Drive

City State Zip Code
Frankfort KY 40601

FEC ID number of contributing
federal political committee.

C

Name of Employer

Frankfort Regional

Occupation

CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 18 / 2013

Transaction ID : SA11AI.28355

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1100.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

HCA INC. GOOD GOVERNMENT FUND

Full Name (Last, First, Middle Initial)

A. Mark Phillips

Mailing Address 124 Palm Harbour Blvd

City State Zip Code
Panama City FL 32408

FEC ID number of contributing
federal political committee.

C

Name of Employer

Gulf Coast Med Ctr

Occupation

CNO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 30 / 2013

Transaction ID : SA11AI.28369

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Cathy Philpott

Mailing Address 5040 NW 123rd Avenue

City State Zip Code
Coral Springs FL 33076

FEC ID number of contributing
federal political committee.

C

Name of Employer

NW Medical Center

Occupation

CNO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 30 / 2013

Transaction ID : SA11AI.28382

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Joseph Pino

Mailing Address 495 Brickell Avenue

City State Zip Code
Miami FL 33131

FEC ID number of contributing
federal political committee.

C

Name of Employer

Mercy Hospital

Occupation

COO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 18 / 2013

Transaction ID : SA11AI.28262

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1100.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

HCA INC. GOOD GOVERNMENT FUND

Full Name (Last, First, Middle Initial)

A. William Mark Rader

Mailing Address 12622 NW 68th Drive

City State Zip Code
 Parkland FL 33076

FEC ID number of contributing
federal political committee.

C

Name of Employer

University Hosp/Med Ctr

Occupation

CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 30 2013

Transaction ID : SA11AI.28381

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Lori Rakes

Mailing Address 960 JF Harris Pkwy

City State Zip Code
 Cartersville GA 30120

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cartersville Medical Center

Occupation

COO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 30 2013

Transaction ID : SA11AI.28526

Amount of Each Receipt this Period

350.00

Full Name (Last, First, Middle Initial)

C. Amanda Rampat

Mailing Address 8139 NW 106 Ln

City State Zip Code
 Parkland FL 33076

FEC ID number of contributing
federal political committee.

C

Name of Employer

Northwest Med Ctr

Occupation

CFO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 30 2013

Transaction ID : SA11AI.28383

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1850.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

HCA INC. GOOD GOVERNMENT FUND

Full Name (Last, First, Middle Initial)

A. Richard Read

Mailing Address 5387 Glenlake Place

City

Sanford

State

FL

Zip Code

32771

FEC ID number of contributing
federal political committee.

C

Name of Employer

Central Florida Reg Hosp

Occupation

CFO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 18 / 2013

Transaction ID : SA11AI.28287

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Angela Reynolds

Mailing Address 1900 Electric Road

City

Salem

State

VA

Zip Code

24153

FEC ID number of contributing
federal political committee.

C

Name of Employer

Lewis Gale Med. Ctr.

Occupation

CFO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 15 / 2013

Transaction ID : SA11AI.28092

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Zadie Rivard

Mailing Address 2851 Longleaf Rd

City

Panama City

State

FL

Zip Code

32405

FEC ID number of contributing
federal political committee.

C

Name of Employer

Gulf Coast Med Ctr

Occupation

Adm Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 30 / 2013

Transaction ID : SA11AI.28371

Amount of Each Receipt this Period

300.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1050.00

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Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

HCA INC. GOOD GOVERNMENT FUND

Full Name (Last, First, Middle Initial)

A. Mark Robinson

Mailing Address 3440 NW Commerce Drive

City State Zip Code
 Lake City FL 32055

FEC ID number of contributing
federal political committee.

C

Name of Employer

Lake City Medical Ctr

Occupation

CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 31 / 2013

Transaction ID : SA11AI.28672

Amount of Each Receipt this Period

750.00

Full Name (Last, First, Middle Initial)

B. Richard Robinson

Mailing Address 1555 Dogwood Dr

City State Zip Code
 Middleburg FL 32068

FEC ID number of contributing
federal political committee.

C

Name of Employer

Memorial Hospital

Occupation

Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 30 / 2013

Transaction ID : SA11AI.28433

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. Victor Rosenbaum

Mailing Address 12930 Lindsey Drive

City State Zip Code
 Anchorage AK 99516

FEC ID number of contributing
federal political committee.

C

Name of Employer

Alaska Regional

Occupation

COO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 18 / 2013

Transaction ID : SA11AI.28213

Amount of Each Receipt this Period

300.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1150.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

HCA INC. GOOD GOVERNMENT FUND

Full Name (Last, First, Middle Initial)

A. Sharon Roush

Mailing Address 17920 Burnt Oak Lane

City State Zip Code
Lithia FL 33547

FEC ID number of contributing
federal political committee.

C

Name of Employer

South Bay Hospital

Occupation

CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 01 / 2013

Transaction ID : SA11AI.27997

Amount of Each Receipt this Period

750.00

Full Name (Last, First, Middle Initial)

B. Michael Roussos

Mailing Address 13111 East Freeway

City State Zip Code
Houston TX 77015

FEC ID number of contributing
federal political committee.

C

Name of Employer

Bayshore Med Ctr

Occupation

COO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2013

Transaction ID : SA11AI.28562

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Kathleen Rubano

Mailing Address 3315 S Alameda St

City State Zip Code
Corpus Christi TX 78411

FEC ID number of contributing
federal political committee.

C

Name of Employer

Corpus Christi Med Ctr

Occupation

CNO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2013

Transaction ID : SA11AI.28563

Amount of Each Receipt this Period

400.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1650.00

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NAME OF COMMITTEE (In Full)

HCA INC. GOOD GOVERNMENT FUND

Full Name (Last, First, Middle Initial)

A. Keith Sandlin

Mailing Address 52 Comanche Trail

City State Zip Code
 Cartersville GA 30120

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Cartersville Med. Ctr.

Occupation
 CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 30 / 2013

Transaction ID : SA11AI.28530

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

B. Gary Searls

Mailing Address 10127 Paddock Oaks Dr.

City State Zip Code
 Riverview FL 33569

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Northside Hospital

Occupation
 CFO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 31 / 2013

Transaction ID : SA11AI.28774

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Sarah Seymour

Mailing Address 13141 Royal George Ave.

City State Zip Code
 Odessa FL 33558-5720

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Community Hospital

Occupation
 Director Primary Care Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 31 / 2013

Transaction ID : SA11AI.28629

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1050.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

HCA INC. GOOD GOVERNMENT FUND

Full Name (Last, First, Middle Initial)

A. Shalin Shah

Mailing Address 18919 Laurent Dr

City State Zip Code
Lutz FL 33558

FEC ID number of contributing
federal political committee.

C

Name of Employer
Regional Med Ctr Bayonet Point

Occupation
CFO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 01 / 2013

Transaction ID : SA11AI.28023

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Richard Shannonhouse

Mailing Address 3625 University Blvd South

City State Zip Code
Jacksonville FL 32216

FEC ID number of contributing
federal political committee.

C

Name of Employer
Memorial Hospital

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 30 / 2013

Transaction ID : SA11AI.28434

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

C. Mike Sherrod

Mailing Address 211 Greenview Terrace

City State Zip Code
Macon GA 31220

FEC ID number of contributing
federal political committee.

C

Name of Employer
Coliseum Northside

Occupation
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 10 / 2013

Transaction ID : SA11AI.28070

Amount of Each Receipt this Period

750.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1450.00

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NAME OF COMMITTEE (In Full)

HCA INC. GOOD GOVERNMENT FUND

Full Name (Last, First, Middle Initial)

A. Barbara Simmons

Mailing Address 1961 SW 52nd Ave

City State Zip Code
 Plantation FL 33317

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Plantation General Hospital

Occupation
 CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 18 / 2013

Transaction ID : SA11AI.28259

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Brenda Simpson

Mailing Address 2 Blackbird Lane

City State Zip Code
 Litchfield NH 03052

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Parkland Medical Center

Occupation
 CNO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 31 / 2013

Transaction ID : SA11AI.28635

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Todd Sklamberg

Mailing Address 11327 Winter Cottage Place

City State Zip Code
 Las Vegas NV 89135

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Sunrise

Occupation
 CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 18 / 2013

Transaction ID : SA11AI.28334

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2500.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

HCA INC. GOOD GOVERNMENT FUND

Full Name (Last, First, Middle Initial)

A. Mickey Smith

Mailing Address 11375 Cortez Blvd

City State Zip Code
 Brooksville FL 34613

FEC ID number of contributing
federal political committee.

C

Name of Employer

Oak Hill Hospital

Occupation

CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 18 / 2013

Transaction ID : SA11AI.28253

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

B. T. Andrew Smith

Mailing Address 8304 Haven Harbour Way

City State Zip Code
 Bradenton FL 34212

FEC ID number of contributing
federal political committee.

C

Name of Employer

St. Petersburg General

Occupation

CFO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 30 / 2013

Transaction ID : SA11AI.28414

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Vicrela Staridolsky

Mailing Address 8983 S. Sunrise Blvd.

City State Zip Code
 Plantation FL 33322

FEC ID number of contributing
federal political committee.

C

Name of Employer

Westside Regional Medical Ctr

Occupation

RN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 18 / 2013

Transaction ID : SA11AI.28261

Amount of Each Receipt this Period

350.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1850.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

HCA INC. GOOD GOVERNMENT FUND

Full Name (Last, First, Middle Initial)

A. Debra Stiffler

Mailing Address 6076 White Tip Rd

City

Jacksonville

State

FL

Zip Code

32258

FEC ID number of contributing
federal political committee.

C

Name of Employer

Memorial Hosp

Occupation

SLA/Cardiac Svcs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 30 / 2013

Transaction ID : SA11AI.28435

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

B. Suzanne Stone-Griffith

Mailing Address 9723 Brook Hill Ct

City

Lone Tree

State

CO

Zip Code

80124

FEC ID number of contributing
federal political committee.

C

Name of Employer

Healthone

Occupation

Nurse

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 01 / 2013

Transaction ID : SA11AI.27978

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

C. Lynn Strader

Mailing Address 14300 Lender Road

City

Midlothian

State

VA

Zip Code

23113

FEC ID number of contributing
federal political committee.

C

Name of Employer

CJW Med Ctr

Occupation

CFO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2013

Transaction ID : SA11AI.28572

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1000.00

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NAME OF COMMITTEE (In Full)

HCA INC. GOOD GOVERNMENT FUND

Full Name (Last, First, Middle Initial)

A. Wendy Stuart

Mailing Address 11750 SW 40 St

City State Zip Code
 Miami FL 33175

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Kendall Reg Med Ctr

Occupation
 CNO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 10 / 2013

Transaction ID : SA11AI.28045

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Hugh Tappan

Mailing Address 550 N Hillside

City State Zip Code
 Wichita KS 67214

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Wesley Medical Ctr

Occupation
 President & CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 30 / 2013

Transaction ID : SA11AI.28468

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

C. R. Carlton Ulmer

Mailing Address 3731 Preserve Bay Blvd

City State Zip Code
 Panama City FL 32408

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Gulf Coast Med Ctr

Occupation
 CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 30 / 2013

Transaction ID : SA11AI.28367

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2500.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

HCA INC. GOOD GOVERNMENT FUND

Full Name (Last, First, Middle Initial)

A. Jerri Underwood

Mailing Address 6931 Lakeshore Drive

City State Zip Code
 Chattanooga TN 37416

FEC ID number of contributing
federal political committee.

C

Name of Employer

Parkridge Med. Ctr.

Occupation

Market CNE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 30 / 2013

Transaction ID : SA11AI.28363

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Tama Van Decar

Mailing Address 1000 Mar Walt Dr

City State Zip Code
 FWB FL 32547

FEC ID number of contributing
federal political committee.

C

Name of Employer

FWB Medical Center

Occupation

CMO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 15 / 2013

Transaction ID : SA11AI.28186

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Bill Voloch

Mailing Address 4955 S Malaya Ct

City State Zip Code
 Aurora CO 80015

FEC ID number of contributing
federal political committee.

C

Name of Employer

Medical Center of Aurora

Occupation

healthcare

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 30 / 2013

Transaction ID : SA11AI.28467

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1500.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

HCA INC. GOOD GOVERNMENT FUND

Full Name (Last, First, Middle Initial)

A. Aaron West

Mailing Address 10180 Vineyard Lake Rd E

City State Zip Code
 Jacksonville FL 32256

FEC ID number of contributing
federal political committee.

C

Name of Employer

Memorial Hosp

Occupation

Interim CMO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 30 2013

Transaction ID : SA11AI.28417

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Amy Wheeler

Mailing Address 123 Highland Villa Drive

City State Zip Code
 Nashville TN 37211

FEC ID number of contributing
federal political committee.

C

Name of Employer

Centennial Med Ctr

Occupation

Controller

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 30 2013

Transaction ID : SA11AI.28519

Amount of Each Receipt this Period

350.00

Full Name (Last, First, Middle Initial)

C. Teresa Wheeler

Mailing Address 1000 Mar Walt Drive

City State Zip Code
 Ft. Walton Beach FL 32547

FEC ID number of contributing
federal political committee.

C

Name of Employer

Ft. Walton Beach Med Ctr

Occupation

Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 15 2013

Transaction ID : SA11AI.28185

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

950.00

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NAME OF COMMITTEE (In Full)

HCA INC. GOOD GOVERNMENT FUND

Full Name (Last, First, Middle Initial)

A. Karen White-Trevino

Mailing Address 5337 Sussex Ln

City State Zip Code
Pace FL 32571

FEC ID number of contributing
federal political committee.

C

Name of Employer

West Florida Hosp

Occupation

CNO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 30 / 2013

Transaction ID : SA11AI.28494

Amount of Each Receipt this Period

350.00

Full Name (Last, First, Middle Initial)

B. Jacob Wiesmann

Mailing Address 51 Jonathan Lane

City State Zip Code
Manchester NH 03104

FEC ID number of contributing
federal political committee.

C

Name of Employer

Parkland Medical Center

Occupation

CFO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 30 / 2013

Transaction ID : SA11AI.28405

Amount of Each Receipt this Period

350.00

Full Name (Last, First, Middle Initial)

C. Carrie Wiles

Mailing Address 941 NW Fresco Way #202

City State Zip Code
Jensen Beach FL 34957

FEC ID number of contributing
federal political committee.

C

Name of Employer

St. Lucie Med Ctr

Occupation

CFO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 31 / 2013

Transaction ID : SA11AI.28607

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1200.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 57 OF 60

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

HCA INC. GOOD GOVERNMENT FUND

Full Name (Last, First, Middle Initial)

A. Jesse Woodall

Mailing Address 4313 Lake Superior Drive

City State Zip Code
 Corpus Christi TX 78413

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Corpus Christi Medical Center

Occupation
 COO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 31 / 2013

Transaction ID : SA11AI.28564

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Suzanne Woods

Mailing Address 917 Mirror Lake Drive S

City State Zip Code
 St. Augustine FL 32086

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Memorial Hospital

Occupation
 CNO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 30 / 2013

Transaction ID : SA11AI.28418

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Vincent Wyatt

Mailing Address 8149 Hollyridge Rd

City State Zip Code
 Jacksonville FL 32256

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Memorial Hospital

Occupation
 CFO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 30 / 2013

Transaction ID : SA11AI.28420

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2000.00

81820.45

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

HCA INC. GOOD GOVERNMENT FUND

A. Suntrust Bank

Date of Disbursement

Three digital displays showing the date 10/21/2013 in MM/DD/YYYY format. The first display shows '10' with 'M' indicators above it. The second display shows '21' with 'D' indicators above it. The third display shows '2013' with 'Y' indicators above it.

Transaction ID : SB21B.28820

Category/
Type

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Amount of Each Disbursement this Period

Category	Percentage
Very satisfied	183.87

B. Suntrust Bank

Date of Disbursement

Transaction ID : SB21B.28821

Category/
Type

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Amount of Each Disbursement this Period

61.77

C.

Date of Disbursement

Amount of Each Disbursement this Period

Category/
Type

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional).....

245.64

TOTAL This Period (last page this line number only).....

245.64

	21b		22	X	23		24		25		26
	27		28a		28b		28c		29		30b

HCA INC. GOOD GOVERNMENT FUND

The diagram shows a rectangular frame with 12 vertical members and 2 horizontal members. A cross-section of a member is shown, indicating a rectangular shape with a central void.

A diagram of a rectangular frame structure. It consists of 10 vertical members and 2 horizontal members (top and bottom). The vertical members are represented by vertical lines with small circles at the top and bottom, indicating joints. The horizontal members are represented by horizontal lines with small circles at the ends, indicating joints. The frame is shown in a perspective view, with the top and bottom members slightly offset to show the depth of the structure.

8000.00